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THE CANADIAN NURSE

AND HOSPITAL REVIEW

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NOVEMBER, 1923

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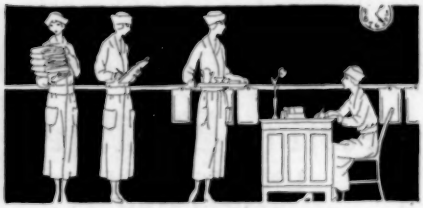

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THE

CANADIAN NURSE

A Monthly Journal for the Nursing Profession in Canada

Editor and Business Manager.....**MISS HELEN RANDAL, R.N.**

VOL. XIX. VANCOUVER, B. C., NOVEMBER, 1923 NO. 11

Officers of the Canadian National Association of Trained Nurses, 1922-1924

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Additional Members of Executive: Chairman, Public Health Section, Miss Florence Emory, 26 Algonquin Avenue, Toronto, Ontario; Chairman, Private Duty Section, Miss Edith Gaskell, 397 Huron Street, Toronto, Ontario.

National Memorial Committee

Report of the meeting of the National Memorial Committee held Monday, October 1st, 1923.

TREASURER'S REPORT

The following report was read:

September 28, 1923.

Receipts—	
Ontario	$15,557.62
Quebec	7,293.63
British Columbia	4,836.35
Saskatchewan	3,376.34
Manitoba	2,026.29
Alberta	1,816.55
Carried Forward	$34,906.78

Brought Forward	$34,906.78
New Brunswick	1,174.25
Nova Scotia	869.78
Prince Edward Island	324.90
United States	15.00
Interest	553.64
Total	$37,843.35
Expenditure	288.38
Balance	$37,554.97

KATHARINE L. DAVIDSON,
Treasurer.

It was decided that the secretary should now write each provincial committee, giving the National treasurer's statement, and asking that all collections should cease, as it is expected that the sum on hand will cover all expenses in connection with the memorial; also to thank each province for the work done during the collecting of these funds.

WORK OF THE BUSINESS COMMITTEE

This was reported by Miss Gunn. The committee had prepared an announcement of the conditions of the competition. This took the shape of an attractively illustrated folder, which was mailed to all the art schools of the country and to all the individual artists whose names had been submitted. Further, with Miss Gunn's help, an outline of the early history of nursing in Canada had been prepared and mailed to the artists as a source of information for them. This outline was taken from a paper, written by Miss M. L. Meiklejohn, which had been read at the second annual convention, Canadian Society of Superintendents of Training Schools for Nurses, Ottawa, October 8th, 1908.

The first designs must be sent in by the 15th day of October of this year.

A letter from Miss Mary C. Stewart was read offering her resignation from the National Committee, as she has moved to Chicago. It was moved by Miss Browne, seconded by Miss Hartley, that the resignation be accepted with regret.

It was decided that the next meeting should be called when need arises. It is hoped that some definite information as to the success of the competition will be in our possession by the first of December.

E. KATHLEEN RUSSELL,
Secretary.

Healing Cults

(Continued)

Surely, surely this reaches the climax of madness; and this is the system which claims the right to treat people in British Columbia.

Mrs. Eddy also says: "Our Master healed the sick, practised Christian healing, and taught the generalities of its Divine principle to His students; but He left no definite rule for demonstrating this principle of healing and preventing diseases. This rule remained to be discovered in Christian Science; a pure affection takes form in goodness, but science alone reveals the Divine principle of goodness and demonstrates its rule." So we leave Mrs. Eddy, in her own estimation, as greater than our Master.

Judge Smith, of Boston, speaking before Judge Hodgins in Toronto, argued that medical men often made mistakes in diagnosis, and should not be granted too great powers. But this argument puts the feet under his own position, and goes to prove that the medical standard should be raised still higher, rather than lowered to the level of the know-nothing Christian Science theory of disease and treatment. He tried to show that Christian Scientists are following the original practice of Christianity. Not so; for Mrs. Eddy claimed that she had made a new discovery; had received a special revelation, and declared that she had improved upon the plan and teachings of Christ, and then copyrighted the plan and made a great fortune out of it. This is certainly not in accordance with the teachings of Christ and His disciples. He also contended that Christian Science did not ignore disease, nor did it contribute to the spread of disease. We have clearly shown, from Mrs. Eddy, that all disease is a mere delusion of mortal mind, and is best cured by being completely ignored. Indeed, it should not even be named. Scientists know nothing about disease, and therefore cannot distinguish one disease from another.

Here one meets with an extraordinary statement. In the first place the child contracts a sickness because the mother thinks it will do so, having been exposed to a contagion. In the next place, Mrs. Eddy tells that if the thought had been the opposite of this the child would not have become ill. This sort of teaching is so absurd that one can hardly imagine that it is countenanced by anyone at this time of day and education. But the quotation contains a real contradiction; for she says that the child becomes sick because the mother is frightened. Now, it often happens that children are exposed to contagious diseases and no one knows it. In such a case the mother could not entertain a fear about what she had no knowledge.

This is her position, as found on page 471, line 24, when she says: "Man is incapable of sin, sickness and death. The real man cannot depart from holiness, nor can God, by whom man is evolved, engender the capacity or freedom to sin." This is further borne out by the statement elsewhere that "Health is not a condition of matter, but of mind; nor

can the senses bear reliable testimony to the subject of health." For arrogance and assumption, the following must be admitted as taking first place: "Truth has furnished the key to the kingdom, and with this Christian Science has opened the door of the human understanding. None may pick the lock nor enter by some other door. The ordinary teachings are material, not spiritual. Christian Science teaches only that which is spiritual and Divine, and not human. Christian Science is unerring and Divine."

Another quotation regarding the claims of Christian Science is taken from *Science and Health*: "Working out the rules of science in practice, the author has restored health in cases of both acute and chronic diseases in their severest forms. Secretions have been changed, the structure has been renewed, shortened limbs have been elongated, ankylosed joints have been made supple, and carious bones have been restored to healthy conditions. I have restored what is called the lost substance of the lungs, and healthy organizations have been established where disease was organic. Christian Science heals organic disease as surely as it heals what is called functional."

Chiropraxy.

In Mr. Justice Hodgins' report the following is found. "Dr. DuVal, who conducts the Canadian Chiropractic College at Hamilton, said to me, 'Chiropractic is a unique science. It has nothing in common with any other method, class, school or cult, neither in its science, philosophy, art, doctrine or principles on which it is based.'"

The theory sustaining this system presumes that, in consequence of displaced vertebra, the intervertebral foramina (openings) are occluded (closed) through which the spinal nerves pass. . . . In this way the nerves are pinched, and chiropractors assume that such pinching is responsible for 95 per cent. of all disease. Chiropractic concerns itself with an adjustment of the subluxations, thus removing the pressure on the nerves.

Dr. Palmer, who conducts the principal school of chiropractic in Davenport, Iowa, was present at one of the sessions of the commission, and, in the course of his address, said he did not teach pathology, except to enable a chiropractor to detect infection and refuse the case. As to bacteriology, he said the chiropractor did not believe in bacteria, and that bacteriology was the greatest of all gigantic farces ever invented for ignorance and incompetency, and, as to analysis of blood and urine, he considered it of no value."

He scouts bacteriology and chemistry, as follows: "They would compel us to study bacteriology. This also is of no value to the chiropractor, who does not consider that it is worth the infinitesimal mites to group and classify them, count their appendages, and try to memorize their names. There is also chemistry, which is a valuable science, but it has nothing in common with chiropractic, and cannot be made an adjunct to it."

According to the Palmer Catalogue, not a very recent one, students get from "six to twelve months'" actual practice. The catalogue says: "The course is divided into eighteen consecutive calendar months, comprising three collegiate years of six months each, all of which are continuous, there being no vacation periods."

(a) Leading chiropractors deride or disbelieve in such well-known and proved sciences as chemistry, bacteriology and pathology. Their teachings are based on error and are refuted by the accomplishments of the great minds in education, research, science and medicine.

(b) Their attitude toward these sciences shows their lack of sympathy for the first essentials in the prevention of epidemics and the regulation of public health.

(c) They declare that education and the ability to make a diagnosis are not essential for the intelligent treatment of human diseases and injuries.

(d) Their schools at most require only a common school education, a training insufficient to permit the student to intelligently undertake any but the most elementary course of study.

(e) The course of professional (?) instruction is too short to enable the student to obtain a training in the sciences necessary for the intelligent or safe practice of the healing art by any method.

(f) The school teaches and encourages its students to advertise, which they are doing, and using the same flagrant methods which have been employed by quacks since the beginning of medicine.

(g) Finally, the leaders of this cult openly urge their graduates to practice chiropractic in violation of the law, and have arranged, through the Universal Chiropractors' Association, to aid and abet them in such outlawry.

There is one thing common to all cults—they despise knowledge of the nature of the ailment they are trying to correct. Yet only those persist who come to accept the axiom that training in the fundamentals is necessary.

Laws regulating the practice of the healing art are (at least should be) in the interests of the general public, and should not favor any particular group of practitioners. It would be discriminating against the public to permit anyone to undertake to treat the sick unless he is properly qualified. Anyone assuming responsibility for the treatment of human diseases needs a training that will enable him to recognize the disease he is called upon to treat; otherwise his treatment is unscientific, dangerous guesswork, and as likely to do harm as good. Such training is needed, no matter whether drugs are employed or not, and no matter what "system" or method of treatment is used.

(To Be Continued.)

Editorial

October is past and the winter's work for each association well under way, and the suggestion has been given the Editor that it might help associations if any special work taken up by any of them be reported to the magazine. This we shall be glad to do. We have been too apt to consider our work as organizations complete when we have planned a programme of lectures and arranged for entertainments where we expect to get sufficient money to carry our own expenses, and fail to see the great opportunity knocking at our doors. The nurses of to-day are needed as perhaps never before to help educate the public as to what a school for nurses really is, and then to demonstrate to the public that the nurses graduating from such schools are doing their part faithfully. There is work to be done in making plans to present to the Educational Department of each province showing the need for better co-ordination of high school work with the work to be done in the training schools. In some provinces, if not in all, the work planned for the technical schools would help the future nurses but for the fact that they cannot matriculate and so lose the chance, which to-day is practically essential, of having matriculation standing for post-graduate work in any of our universities. We must insist at all times and to everybody, that no hospital has the right to be a training school for the modern nurse which does not have a high educational standard for entrance. The higher education is insisted on in the normal school for the education of the teacher, and the same standard can be made for the hospital school. We are allowing a situation which will prove a decided hardship for the future graduate nurse when we tolerate conditions as they exist in many schools. By educating the public, the parents of our future graduates, and talking in the schools to the students, will all bring the important point of proper educational preparation for our nurses, as well as for our teachers, to their attention.

* * * *

Postage Stamps are not to be used on Cheques or Receipts After October 1st, 1923

Subsection 2, of Section 10, of the Special War Revenue Act, dealing with stamp tax on receipts and cheques, came into operation on October 1st, after which date you will be required to use the *excise tax stamp* in place of the ordinary *postage stamp* that has been so commonly used in the past both on receipts and cheques.

Your particular attention is drawn to this matter to avoid the possibility of your cheques being dishonored in the event of your using postage stamps in place of excise tax stamps, as we understand from the banks that the use of *postage stamps* on cheques will, to all intents and purposes, be construed as unstamped.

National Office, Canadian National of Trained Nurses

The Executive Committee of the Canadian National Association of Trained Nurses wishes to announce that a national office for the association has been established at 609 Boyd Building, Winnipeg, Man., with Miss Jean S. Wilson, R.N., Executive Secretary, in charge.

The nurses of the various associations affiliated in the National Association have long felt the need of a headquarters office with a full-time secretary, and at the annual meeting held in Edmonton in June, 1922, a majority vote of the associations represented decided on the establishment of such an office.

It is the wish of the members of the National Association that this office should become a Bureau of Information for the various branches of the nursing profession in Canada. Nurses wishing to obtain positions should send a request to the executive secretary for an information form. Hospitals, institutions and organizations employing registered nurses are recommended to refer to the executive secretary when wishing to obtain the names of nurses available for their needs. No fee or commission is charged for any assistance received through the National office.

The duties of the treasurer and archivist have been delegated to the executive secretary.

* * * *

The following extract from the Registration Act of Pennsylvania has been sent to this office, with the request that it be published in order that some nurses who believe themselves in good standing in Pennsylvania may know that re-registration is required. Blanks may be had from Pennsylvania State Board of Examiners for Registration of Nurses, 34 S. 17th Street, Philadelphia, Pa.

PENNSYLVANIA RE-REGISTRATION

Extract from Act of Assembly, June 8, 1923:

"On or before the 1st day of November of each year, after the year one thousand nine hundred and twenty-three, the secretary of the Board shall mail to each registered nurse and licensed attendant in the State of Pennsylvania a blank application for re-registration, addressing the same in accordance with the postoffice address given at the last previous registration. Upon the receipt of such application blank, which shall contain space for the insertion of his or her name, office or postoffice address, date and number of his or her license, and such other information as the Board may deem necessary, he or she shall sign same with his or her name in his or her own handwriting, and fill out the address and other blanks in his or her own handwriting, after which he or she shall forward such statement and application for renewal of his or her registration certificate to the secretary of the Board, together with the fee of one dollar ($1.00) for registered nurse and fifty cents ($0.50) for licensed attendants. Upon

receipt of such application and fee, and having verified the accuracy of the same by comparison with the applicant's initial registration statements, the secretary of the Board shall issue a certificate of registration, which shall render the holder thereof a legally qualified registered nurse or licensed attendant, as the case may be, for the ensuing year.

"Said application and fee must reach the secretary on or before the 1st day of December following the adoption of this statute."

THE NURSE

I have known the gasp of the dying,
And the first faint cry of the born;
And wavering souls have brushed me
As they sought their own in the morn.

I have looked upon sorrow and suffering,
And engaged the battalions of pain;
Trampled them under in triumph,
And forth to the battle again.

Alone, through the long night watches,
I have seen the day-star rise;
But I've glimpsed more of heaven
In fading, triumphant eyes.

I've raised the head of the dying,
And shrouded the face of the dead;
And bathed the warm limbs of the new-born,
To carry the race ahead.

CHARLOTTE WHITTON.

UPLIFTING THOUGHTS

They tell me thou art rich, my country; gold
In glittering flood has poured into thy chest;
Thy flocks and herds increase, thy barns are pressed
With harvest, and thy stores can hardly hold
Their merchandise; unending trains are rolled
Along thy network rails of East and West;
Thou art enriched in all things bought and sold!
But dost thou prosper? Better news I crave,
Oh, dearest country, is it well with thee
Indeed, and is thy soul in health?
A nobler people, hearts more wisely brave,
And thoughts that lift men up and make them free,
These are prosperity and vital wealth.

HENRY VAN DYKE.

The World's Pulse

By Elizabeth Robinson Scovil

A Remarkable Conjunction

On the 10th of September there was an eclipse of the sun, visible in North America and attended by a conjunction which will not occur again in this century. The earth, the moon, the sun and Venus were practically in a straight line.

The British Empire Exhibition

The Canadian Government Exhibition Commission has issued a post-card asking, "Shall we have the pleasure of welcoming you to our pavilion next year?" About ten million dollars will have to be spent on this exhibition before it opens in London in 1924. Steamship fares are to be greatly reduced, and it will be an excellent opportunity to visit the Old Country.

A Zone of Silence

The great cenotaph erected in London to the glorious dead is to be surrounded for some distance on all sides with a paving of rubber. No matter how heavy the traffic, noise will automatically cease when it enters this silent zone.

Excavating a Roman City

The University of Manchester has undertaken the excavation of the ancient city of Viroenium. It has been entombed for fifteen centuries, and was founded by the Romans as a stronghold against the Welsh. Wroxeter on the Severn, in Shropshire, is built over it. Previous exploration has revealed remarkable architectural features. It has a town hall, baths, and other refinements of Roman civilization. The city was surrounded with a wall whose course can still be easily traced.

Secret Rays

It is believed that the Germans have discovered some secret means of damaging airplanes. Thirty French machines have been forced to descend on German soil and have been confiscated. It is known that the Germans are experimenting with a new force that can be projected through the air, and, coming in contact with metal, will generate heat enough to melt it.

A Princely Reader

When the Prince of Wales, as Lord Renfrew, crossed the Atlantic to Canada in the Empress of France, he read the lesson at the Sunday service held on board. The chapter, the thirteenth of 1 Corinthians, was read in clear, resonant tones, heard in every part of the great saloon.

A Cheap Insulin

It is reported in the daily press that a cheap substitute for insulin has been discovered which can be produced in quantities. It is a synthetic substance made by Oliver A. Newell, of London, by finding out the chemical constituents of insulin and combining them. It is a greenish powder which can be administered by mouth instead of hypodermically, and is said to be efficacious; though at this writing the medical tests are not complete.

London's Air Port

The British airways have just completed their fourth year of pioneer work; about 2,000,000 miles have been flown by the 100-mile-an-hour expresses since 1919, and 30,000 passengers carried. At the Croyden air port great liners arrive or leave almost every hour to or from Paris, Berlin, Cologne, Brussels, Budapest, Prague, and Warsaw. The fare for the flight to Berlin is the same as the first-class railway fare. The control officer in the high control tower knows the position of every plane in the air. He receives information from each one every twenty minutes and issues directions to them. There are switches controlling the aerodrome lights; one is pulled and an enormous glass-covered "T" flashes the exact wind direction for landing. Another is touched and an illuminated cone of 72,000 handlepower sends out a white light that at night can be seen twelve miles away. The flash of red lights means danger, and there is a flood light for night landing.

Nurse Marries a Prince

Miss Louise MacLachlan, of Chatham, Ontario, has married Prince Oleg Vladimir, a nephew of the Queen of Italy. Miss MacLachlan escaped from Smyrna when it was devastated in the war between Greece and Turkey. She went to Athens and joined the American Near-East Red Cross, which was controlled by the Dowager Queen Olga. King George of Greece called on Miss MacLachlan to express his appreciation of her work and introduced her to Prince Vladimir.

The Japanese Earthquake

One of the greatest earthquake disasters in history is the one that demolished the cities of Tokio and Yokohama early in September. Thirty thousand persons perished in the great open space of the military clothing depot in Tokio alone. Fire added to the horrors and many were roasted alive. A lady who was at Yokohama said, "It was terrible to see the children struggling through the ruined houses. Many were bleeding from their injuries. Strangely enough, few were crying; they looked more astonished than frightened. The loss of life cannot be exactly computed, but was well over 100,000."

News from the Medical World

By Elizabeth Robinson Scovil

Exhibition of Insulin

At the Canadian National Exhibition in Toronto, the University of Toronto showed the original utensils used by Dr. Banting in the preparation of insulin. He officially opened the exhibition. The university has converted the old Y.W.C.A. building into a plant for the manufacture of insulin.

Prevention of Venereal Disease

In an English report on the prevention of venereal disease, it is stated that promiscuous intercourse is the main cause of venereal disease; that there is no absolute preventive except continence; that a large number of sufferers are innocent persons; that syphilis is a disease of great gravity if not treated early; that it causes serious results and is transmissible to children.

Opthalmia Neonatorum

A physician states that blindness from opthalmia neonatorum can and should be prevented. He carries in his bag a solution of silver nitrate, one per cent., and never neglects to use it on the eyes of the new-born infant. The State of Illinois furnishes the solution in beeswax ampules.

Children in Large Families

A German investigator states that the child mortality in large families increases 15 per cent. with four children, 32 per cent. with seven, and over 50 per cent. with ten or more. The physical development is under normal, especially from the third to the sixth year and in the later children. The over-crowding in the home is most injurious to the younger children.

Vital Statistics

The Dominion Bureau of Statistics has published a preliminary summary of births, deaths and marriages for 1922. The total birth rate for eight provinces was 24.8 per thousand, compared with 26.3 the previous year. British Columbia has the lowest birth rate, 18.0, and New Brunswick the highest, 29.2. The latter also had the highest infant mortality, 103.7, and British Columbia the lowest, 64.6. Maternal deaths were 5.5 per thousand living births, Alberta having the highest percentage, 6.90, and Prince Edward Island the lowest, 3.4. Puerperal albuminuria and convulsions caused most of the deaths. The death rate per thousand was 10.4; in 1921 it was 10.6. There were 75 deaths from cancer in every thousand and 68 from tuberculosis. The marriage rate was 7.3 to 8.0 in 1921.

Antenatal Care

In a paper on this subject in the *American Medical Association Journal*, some interesting facts are stated. Twenty-four women who showed every symptom of abortion were treated by absolute rest in bed and doses of morphin and atropin, pushed to the physiologic limit, and had living children at term. A small series of cases giving a history of habitual abortion was treated with hypodermic injection of corpus luteum during the first three months of pregnancy. A number of the women gave birth to normal living infants for the first time. The writer believes that maternal deaths from toxaemia and infection can be virtually eliminated by proper instruction, preparation, supervision and treatment of mothers during the periods of gestation, parturition and the puerperium.

Radium

The total supply of radium in the United States is reported to be about 100 grams, most of which is owned by physicians. Rich deposits of radium have been found recently in the African Congo. Although it is richer than that found in Colorado, it yields only one part of radium to 5,000,000 parts of ore.

A Breast Milk Dairy

Dr. Henry Dwight Chapin, the well-known specialist in children's diseases, describes a station in New York where mothers come daily for the purpose of expressing from their breasts the milk not needed by their own babies. It is mixed, then bottled, and the persons to whom it is sold are required to pasteurize it before using. It has been found that human milk can be fed from a bottle. Any period of lactation will usually fit a baby of any age. Its use during the first month or two of life materially reduces infant mortality. Maternity hospitals and health centres are advised to establish similar undertakings.

A Great Discovery

Great Britain proposes to honor Sir Ronald Ross by establishing a Ross Institute in London for research into the problems of tropical medicine and diseases. Sir Ronald Ross was the discoverer of the fact that the mosquito is the transmitter of malaria to man. His discovery ranks with those of Pasteur, Lister and Jenner.

Nurses Caring for Indians

Three Red Cross nurses are doing public health work in Indian reservations in the United States. The expense is borne by the American Red Cross.

Children in Institutions

It has been noted that strikingly good health and excellent nutrition can be maintained in an institution. Some simple rules must be observed. Regularity in habits of eating and sleep, rest and exercise, liberal but simple diet, and freedom from contact infections.

Public Health Nursing Department

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Address public health news items to the nurse who represents your province on the Publication Committee. Miss Laura Holland, 22 Prince Arthur Avenue, Toronto, Convenor.

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Profession, Patient and Public

By Allan Craig, M.D.,
Associate Director American College of Surgeons,
State and Provincial Activities.

In the establishment of the minimum standard for hospitals by the American College of Surgeons, the object has been to render a better service to the public as well as to the profession. Our hospitals are built and run for the benefit of the patient. They are not for the convenience of doctors and nurses. In this enlightened day the medical and nursing professions cannot stand behind a veil of scientific mystery, but must take a leading place in the movement for better health, realizing a definite public responsibility and obligation.

The field of nursing, like the practice of medicine, has, within the last few years, become rapidly divided into specialties. More and more the nurse has been delving into the field of science until the term "nurse" no longer holds its old-time meaning, applying to one who has to do directly with the care of the sick. The public health nurse is in reality an educationalist and an investigator, whose duty it is to instruct the individuals under her care in the principles of healthful living. Whether our nurse of the future is to be more of a specialist than she is at present,

or whether in the progress of things she will become once more the old-time bed-side nurse with the specialist named according to her respective duties, is not to be discussed here. There is, however, a very definite and fundamental requirement for all who are engaged in the field of nursing or medicine of any form. While the influence and training in the hospital or college has much to do with the after life of the individual, still there are principles of personal character required, and it is these rather than mental attainments or higher education which most often mark the difference between the successful nurse and the failure.

There is in every profession an honorable code of procedure, an underlying ethical standard which must be deep-rooted in every individual member. It is this which provides the profession witih its "esprit de corps" and its place in the public regard. One or two high-standing individuals in any profession do not establish or make that profession. The basic principles of public regard and confidence lie, in the average of all the individuals, in the profession. Here rests the serious individual responsibility of every nurse. The reputation and standing of the profession is in her hands. She may make or mar it. By thoughtless acts or promiscuous discussions of matters which are only for private or professional consideration the morbid curiosity of the lay mind may be amused or satisfied for the moment, but there comes a reaction later when the onus is placed upon the nurse, with criticism not only of the individual, but also of the profession.

How often have doctors or nurses asked themselves the question, "Just what do people in general think of our profession?" Some of us may be prone to disregard public opinion; but do we stop to realize that governments and nations, public institutions, and we, ourselves, as a profession, depend largely for our existence upon that same public sentiment and opinion?

The basic principle of the successful nurse must be sound character, professional honesty, and a just pride in her calling. The training school which overlooks these essentials cannot stand for the highest attainments in nursing education. The proof of the school rests in the standing of its graduates.

The nurse or doctor who looks upon the patient simply as a case, or number ten, is lacking in one of the greatest requirements for a successful practitioner of the healing art. Every patient, whether he be rich or poor, high or low, is an individual member of the human race, with his problems, his sorrows, joys, and disappointments. As the leaves of the trees vary, so do the patients under our care show different types of character and mentality. Why does the practitioner of quackery and cultism, absolutely ignorant of the science and art of modern medicine, often have a large following? Because he is an astute student of the mental attitude of his patient. He satisfies the patient. Let us then ask this question in all seriousness, "Is there not a danger that we to-day are

giving so much attention to scientific details that we are neglecting humanitarian necessities?"

Few of us seem to realize the fear and dread with which the average patient goes to the operating room or undertakes an anaesthetic. It requires a strenuous personal experience to develop that individual consideration and discreet sympathy which inspire confidence and are the attributes of a successful doctor or nurse. The study of the individual mental characteristics of the patient should be an essential part of the training of every nurse. Unless she has accomplished this art, she cannot hope for a full measure of success.

Perhaps all this has seemed idealistic. In reality, it is truth and necessity. Upon these principles rests the structure of a sound nursing profession with its high ideal of service to the human race. Let us not, in reaching out for more scientific detail, altogether blind ourselves to the realization of the importance of studying the character and individuality of those with whom we come in professional contact. Just as the honor of the nursing profession depends upon the average of its members, so is public opinion based upon the regard of each individual. By a due consideration of our patients, their families, and friends, there shall be rendered a more efficient service to the individual and a more abiding place for the nursing profession in the confidence of the public.

Child Welfare Work in Rural Communities

How best to bring to the mother in the rural community a better knowledge of the care of her baby and children of pre-school age was a problem which confronted the Provincial Department of Public Health of Alberta when it became actively engaged in the health problems of the Province in 1918.

By means of a very practical health exhibit which was shown at the summer fairs in the various centres, the attention of the public was directed to the various phases of public health work which were being undertaken by the department.

Wherever the exhibit was shown, clinics were held daily for babies and children of pre-school age. At these clinics, local doctors, assisted by public health nurses who travelled with the exhibit, made complete physical examination of all children brought to the clinics. Those children who were up to the standard weight and height and free from physical defects of any sort were given a health certificate.

While it was felt that the children received a very thorough examination at the hands of the local doctor, still very little information was given the mother regarding diet and health habits. There was also a tendency on the part of the parents to bring only those children whom they thought were up to the standard, as the idea of receiving a health certificate was uppermost in their minds.

The board of directors of the various fairs found the clinic to be quite a drawing card, and it was advertised in some places as a baby show, and was added to the list of attractions along with the midway, horse racing and other events; some well-meaning but misinformed merchants even going so far as to offer a prize for the best baby. Of course, the nurses and doctors steadily refused to have anything to do with contests of this sort. While there is no doubt that the work done at the fairs had a great deal to do with stimulating interest in public health activities, it was an expensive service; distances were great, and transportation rates heavy, and some of the special objects of the work were being overlooked. It was then that the summer itineraries were planned, which have proved such an effective method of getting in touch with the children and mothers in the rural communities.

The various women's organizations throughout the province readily agreed to arrange for a hall in which to hold the clinic, do all the advertising, and also provide the services of a doctor if the mothers in the community desired to have one present. Two nurses in a Ford car travelled from place to place, carrying their equipment with them. The co-operation of the physician was invited at each clinic; the children were weighed, measured and examined. The attention of the mother was drawn to any defects noticed, such as enlarged tonsils and adenoids, obstruction of the nasal passages, defective teeth, fatigue, posture, etc. Special attention was given children who were found to be underweight for their height. Advice was given the mothers regarding diet and routine health habits. In all cases where children appeared to be suffering from some serious defect the mothers were urged to take the child to the family physician.

That the people appreciate this service is evidenced by the large number who take advantage of it. Proof has been given many times that they benefit by the advice given, when, upon revisiting a place, the nurses have seen for themselves the improvement in individual cases.

Coming, as these toil-worn pioneer mothers do, over long prairie trails, on horseback, in wagons, carts and vehicles of every description, eager to learn how to better home conditions, they are an inspiration to those sent to work amongst them.

Owing to the climatic conditions in Alberta, the travelling clinic can only function from May until October. Clinics with doctors and nurses in attendance have been conducted at all the conferences held by the home branch of the Soldiers' Settlement Board for the past three years. In this way we have been able to keep in touch with the wives and children of our soldier settlers in this province, and much has been done to better health conditions in their homes.

B. A. Emerson, R.N., P.H.N.

The V. O. N.

By One of Them

Victorian Order Nurses. Their story who shall tell?
Well does Victoria know them—St. John knows them well.
From Nova Scotia's chilly clime to farthest Western strand
The Order's blue-clad nurses are in day and night demand.
They never fail to tag the stork, though late and far he roams,
Or counsel worried mothers in the country's pleasant homes.
(With apologies to William Macaulay.)

"We're just a band of nurses, who go about the town,
Bidding patients keep their spirits up and keep their physic down.
We follow up our cases in rain or shine or sleet;
If other transportation fails we always have our feet.
We get the doctor's orders, nor let one need go by,
Post-operative dressing or a simple hot and high.
A wondrous wealth of detail we find upon our hands,
From Tommy's chronic colic to a dearth of pots and pans.
One patient's careless liver had slipped 'round to the back;
And one's sciatic nerve had strayed upon her colon's track.
Wee Billie had the janders on coming here at first;
The other babies had it bad, but sure he had it worst.
Jack had the double measles when he was very small;
His mother had the Caesar's Cut before he'd come at all.
And so it goes from morn to night—from night again to morn:
There's someone sick or someone sad or someone getting born.
At many birthday parties we're very welcome guests—
'My wife says will you come at once, and bring some babies' vests!'
Some trust us with their secrets—some swamp us with their woes;
Some get us mixed with Providence when short of coal or clothes.
Some pay us twice our modest fee—some cannot pay at all,
But that will never stop us from responding to the call—
The call to those who suffer, be they children, women, men;
All colors, creeds, conditions know and bless the V. O. N.
But if we 'play some favorites' in carrying out our parts,
What wonder if the smallest ones are nearest to our hearts.
It isn't easy going—there's prejudice to fight,
'Dummies,' officious neighbors, and windows sealed up tight;
But when the battle's over we can share the mother's joy,
When the puny, ailing babies change to sturdy girl or boy.
It helps us through our daily round, it cheers us for the fray,
The work that waits us, feast and fast, Christmas and New Year's Day.
The lowest infant death-rate from Coast to far-flung Coast!
We've done our share in making that Victoria's happy boast.
We like to think we are some use in this grim world of strife,
For strength and health are more than wealth—they are the Nation's life!"

Rene Norcross.

The Health Building at the Brandon Exhibition, 1923

In connection with the health conference and exhibit work carried on by the Public Health Nurses' Department, the health building at the Provincial Exhibition, held in Brandon during the week of July 2nd, deserves special mention.

The building itself has a modest exterior, but the artistic arrangement of the interior presented quite a contrast by its pleasing and inviting appearance. The decoration scheme, which was green and white, relieved by pink garlands, together with the exhibit arranged, caused a pleasant association of the ideas of health—education and happiness—which centred about the main idea of the building—child health.

One side of the building of health was devoted to the work of health conferences, which were held on July 2nd and 3rd. The fair board placed two glass cubicles for consulting room purposes, which provided splendid facilities for examining, and at the same time demonstrated to the public the work carried on at the children's health conferences.

Two child specialists, Dr. Norton and Dr. Lindsay, examined one hundred and seven children.

The health conference department consisted of admitting, weighing, measuring, consulting and dressing rooms. A nursery at the rear of the building provided a cool, comfortable place for mothers to care for their children. Here, bottle feedings were heated, and bathing facilities for infants were afforded to mothers who were camping.

The other side of the building was used for a health exhibit, first aid and rest rooms; information and demonstration booths for the teams in home nursing and first aid, and care of the baby; for weighing and measuring, and for the distribution of free literature.

The health exhibit consisted of posters arranged to give information in maternal and child welfare, health in the school, and communicable diseases; and models demonstrating new ideas in child care.

The first aid and rest room provided a cool, restful place for those requiring their use, and the information desk afforded visitors an opportunity of receiving information in all matters pertaining to health, and the organization of the public health nursing service.

The team demonstrations were given by graduates of the Little Mothers' League from Minnedosa and Carman, on July 4th and 5th. Their work demonstrated emphatically the benefit of the Little Mothers' League teaching in the schools; and what will be of most interest to the nursing profession is the fact that it has proved a means of guiding students to the training schools.

Weight and height tests were given to the children, as well as a number of adults, which were accompanied by individual talks, whenever advice was indicated. The scales were introduced as a means of

educating the public of their value as an index to health, and of impressing their importance in health work in the schools.

The record of the work accomplished would be incomplete without mentioning that the health building was planned and arranged entirely by public health nurses, so that much of the success achieved is due to their efforts.

A. E. WELLS.

Child Welfare Work in Montreal

Montreal is a city whose dual language results in two streams of effort in child welfare work. Like the Ottawa and the St. Lawrence, they flow for a time side by side, clearly defined, before they will merge in one great river of accomplishment.

The work for the French-speaking population is carried on through fourteen centres maintained by the City Department of Health, and fifteen "Gouttes-de-Lait" under independent French control.

Organized child welfare work among the non-French population began several years ago, and by 1917 baby welfare stations had been opened under different auspices in several districts in the city. Here it was a babies' hospital, there a Presbyterian settlement; here an Irish Catholic group, there another social settlement; here a neighborhood club, that developed a milk station or baby clinic as a part of its work. These were then grouped into an organization called the Affiliated Baby Welfare Stations, with a central committee to assist in financing them. About the same time a Child Welfare Association had been formed to promote other phases of work for children, and at the end of 1921 the two groups combined. With the beginning of 1923 a complete centralizing of direction and control of all the activities of these centres was undertaken, with a budget assured by the Financial Federation of Social Agencies.

There are now eleven health centres maintained by the association, each with one or two conferences a week for babies under two years. These are so-called "well baby" conferences, for the work is entirely educational and preventive. No sicknesses other than feeding disturbances are dealt with, all other maladies being referred to a private doctor or to a dispensary.

The number of babies under supervision is growing steadily. There are now about twenty-nine hundred babies being visited in their homes by the nurses from the health centres, who give home teaching and demonstrations of infant care between the visits of the babies to the centre for weighing and medical examination.

The effect of this constant teaching has been well seen during the past summer. The rate of mortality from summer diarrhoea among these babies this year has been only one-fourth the rate from the disease in the city on a whole. Many mothers have said, "Yes, baby began to get sick last week, but I did just what the nurse said and he got all right by the next day."

Breast feeding is urged in every possible case, and often is restored after a considerable period when the neighbor's advice has led the mother to try some patent food. Countless mothers have been encouraged and enabled to maintain this safeguard for the baby's health.

Each centre has a public health nurse in charge, who is responsible for the conduct of the conferences and for the visiting in the homes. Two of the centres have a register of more than five hundred babies and require two nurses.

At four of the centres there is also a prenatal conference every two weeks. A nurse for this special work is kept very busy with her advisory visits. Patients who are unable to attend the conferences regularly are carefully supervised, and records of blood pressure and urinalysis are brought in to the doctor in charge of the clinic. Duplicate records are sent to the Maternity Hospital, if the woman expects to go there, or left with the patient for the use of her private doctor. Any unfavorable symptoms are at once reported to the doctor who is to carry the confinement.

The staff of the association consists of a director, a part-time medical director, a nursing supervisor, twelve health centre nurses, one nurse for prenatal work, and two nutrition nurses. Pediatrists carry the medical work of the conferences for babies, and prominent obstetricians conduct the prenatal clinics.

Educational work for rural districts and small towns of the province has been undertaken by means of a series of prenatal letters sent to individual women month by month. There has been a very encouraging demand for these letters, which are now going regularly to a great many homes, not only in Quebec, but also in all parts of Canada. These letters teach the hygiene of pregnancy and encourage women to secure early the necessary medical supervision.

A demonstration of the value of nutrition work is being carried on in several English and French schools. Groups of under-nourished children are selected in each school and given intensive care and education in health habits. The method followed is that developed by Dr. Emerson, of Boston. The interest aroused by these classes in the last year has resulted in the establishment of a milk lunch in many of the schools.

Another activity of the association which arouses much enthusiasm is a summer day-camp held in large shady grounds loaned for the summer. A nurse is in charge at the camp, and, with several play supervisors, sees that the hundreds of children are safe and happy. About two hundred children were selected to receive daily additional nourishment of milk and buns. An attendance of twenty-one thousand during the three summer months proves the popularity of the camp.

Though the work of the association shows rapid and steady growth, much remains to be done. The English-speaking population of the city is estimated at about three hundred thousand, and there is already a

clearly defined need of more health centres. The prenatal work is increasing steadily and requires a second nurse. The next development is the establishment of health conferences for the pre-school age child. This is planned for the coming year, when it is also expected that nutrition work for these younger children will be undertaken at several of the health centres.

V. M. MACDONALD,
Director Child Welfare Association of Montreal.

NEWS ITEMS

QUEBEC

Miss Charlotte Champagne, graduate Notre Dame Hospital and of the Public Health Nursing Course, McGill School for Graduate Nurses, 1921-22, has recently been appointed field supervisor of the French Metropolitan Nursing Service in Montreal.

Miss Chillas and Miss Lawrence are to have charge of the public health section, the flower booth, at the nurses' bazaar to be held at the Ritz the latter part of November.

Miss V. M. MacDonald, of the Child Welfare Association, is attending the annual meeting of the American Child Welfare Association in Detroit, October 15th to 17th.

Miss Beatrice Johnstone, of the first group of nurses who received their degrees on completion of the five-year course given by the University of British Columbia and the Vancouver General Hospital, has been taken on the staff of the Victorian Order of Nurses in Montreal. During her final year Miss Johnstone specialized in public health nursing.

SASKATCHEWAN

The Division of School Hygiene, under the Department of Education, have recently appointed the following nurses on their staff: Miss Florence West, St. Luke's Hospital, Ottawa; Miss Lillian Lynch, Winnipeg General Hospital; Miss Owena Smith, Vancouver General Hospital; and Miss Rae Chittick, Johns Hopkins Hospital, Dalhousie.

Miss Jean Browne, Director of Junior Red Cross for Canada, recently visited Regina and addressed meetings of students and teachers of the Normal School.

A new Red Cross nursing outpost has been established at Big River, and one at Lucky Lake is nearing completion. The latter will make the tenth Red Cross nursing station in the province.

MANITOBA

Miss Iverson has resigned from the Red Cross nursing staff.

Miss Pearl Campbell (W.G.H., 1921) has accepted a position with the Provincial Board of Health, and is at present at Minnedosa, Man.

Miss Hannah Fogarty, who had charge of the Red Cross Convalescent Hospital for Soldiers at Winnipeg Beach, has returned to Winnipeg, as this hospital is open only during the summer.

The Manitoba Dental Association has made arrangements whereby an educational film, "Your Mouth," can be procured through the Canadian Releasing Corporation, Winnipeg. This film was shown on the "Better Farming Train" and created great interest among the school children.

For the first time this summer the Robertson Memorial fresh air camp at Gimli, Man., had a hospital erected for convalescent mothers and children. It was open from June 28th to August 31st, and has accommodation for thirty-five patients. Patients are referred to it by the Social Service nurses at the different Winnipeg hospitals. Also children at the fresh air camp who were taken ill during their stay there were transferred to the hospital, unless they had any contagious illness, when they were not admitted. Patients usually remained four weeks. Miss M. A. Simpson, of the Red Cross, had charge of the hospital.

Miss Hall and Miss M. M. Black leave shortly for McGill University to take a public health nursing course.

BRITISH COLUMBIA

Mrs. Anna Stabler, R.N., and Miss Isabel Jarrares (W.G.H.), both on the staff of the British Columbia branch of the Red Cross, left at short notice for relief work in Japan, and return shortly to Vancouver.

Miss Buckley, R.N., has resigned from the staff of the Saanich Memorial Health Centre, and accepted the position as dental nurse for the Victoria schools.

Mrs. Annie L. Naylor, R.N., head of the V.O.N., North Vancouver, has recently resigned, and will leave shortly for Bellingham, Wash., where she will make her home.

Pupil Nurses' Department

Student Nurses at the Student Christian Movement Conference

The Student Christian Movement held its third annual conference at the Elgin House on Lake Joseph, Muskoka, from September 17th to 24th. It was a gathering of students from Central Canada, brought together to discuss the problems and opportunities of those who are training to serve. Among the two hundred present, there were fifteen nurses; and it is safe to say that no group enjoyed the week more than they did.

Almost every nurse has a desire to "make good" in the great work she has undertaken, and to really use her training to serve others. But have we not all noticed that, as the months go by, we lose some of our first enthusiasm, and sometimes talk about being "fed up"? It can never be said that this is the fault of our splendid training. It is just that we are so very human, and lose sight of the vision with which we started. Perhaps our superintendents realized this when they arranged for their schools to be represented at the Student Christian Movement Conference.

All who know the Elgin House know how beautifully it is situated, but those who have not seen it in its autumn glory have not seen it at its best. The Elgin House meals might well have been termed a "howling success," as each group vied with the other in giving their respective yells.

As we think of our weeks together, it is not on our social life, but on the study hours that we dwell. The leaders and speakers came to us from all over the world. From Poland came "Bill" Rose, with his story of student life in Central Europe, and of the struggle young men and women were making to get an education, and of what a great service Canada's students were rendering them by their friendship and their Student Relief Fund.

From India came Professor Yohan Masih, with his encouraging reports of the present state of the Hindu mind, and with his plea for a

united Christian Church; four hundred and ten different organizations being now at work in India, which is very confusing to the Hindu and a great drawback to the work there.

From China came Mr. Djong, and from Austria "Fritz" Hansen, both students themselves, with their stories of student life in their own countries. Both spoke of the friends they had found among the students of Canada, and of Canada's neighborliness; and of how in this small way among the students of the different countries was being founded a real brotherhood of all men, which some day would go far toward solving many of to-day's great problems.

There were many others who met with us as leaders, and inspired us to better things. But perhaps the outstanding message came from Arabia, through Dr. Paul Harrison. His message naturally appealed to the group of nurses very much. How plainly we could see things as he pictured the work of the last thirty-three years!—the men's ward, where no woman could enter, with the beds on the floor, and each patient with his own special nurse brought in from the desert with him. These people were most devoted to their patients, but had no idea of what it meant to be clean. He had a young Persian trained to assist him in his operating room, but it had taken one whole year to get him to realize something of what surgical technique meant. A great deal of the medical work is done in the homes, Dr. Harrison making several trips each year to the distant settlements. On his last trip, out of sixty-seven operations only one became infected, which speaks volumes for the native assistant. Working with Dr. Harrison is one trained nurse, who has charge of the women's ward. It is very hard for a man to serve the women of Arabia, and Dr. Harrison's special plea was for a lady doctor and several public health nurses to undertake work among the women in their homes.

This is not an attempt to write a report of the conference, but to try and make anyone who reads these lines see what having been present there means. One feels like a blind man, groping about in a dark room for a black cat which is not there, when attempting to make others feel a little of the thrill and inspiration of such a gathering. It is impossible to overestimate its value to the nurses who attended, or to the training schools which sent them.

RUTH JACKSON,
Pupil Nurse, Wellesley Hospital, Toronto.

Pupil Nurse

Have you ever stopped to consider the meaning of the title applied to those of us who hope one day to become graduate nurses? I mean the term "pupil" or "student" nurse replacing the old designation of "nurse-in-training." It would appear that we use the term "in training" much more than do our superiors. Does this mean a different mental attitude on our part?

There is a difference between education and training. While training is the bringing to perfection of certain powers only in order to achieve a certain end, education means the systematic development of all our powers—mental, moral and physical.

Do we look upon our three years as a period in which we shall be trained to fulfil certain tasks to perfection, those tasks being very beneficial to the sick around us, or do we look upon these three years as a period in which we shall continue our elementary education upon broader and more humanitarian lines?

By the acceptance of the new term, our boards of management, superintendents, doctors, etc., have demonstrated their willingness to give us an education in lieu of the more old-fashioned training; but education cannot be thrust upon us—it must be sought by us.

It would be both interesting and profitable if we would sit down quietly and review our position as students, and just see what we were getting as the result of three years spent in our schools.

Some may reply they want, and are getting, a means whereby they can get a livelihood or certain social advantages. Our training should, and certainly does, give us these things; but surely we want something more. Some may reply that it was with the idea of service to others that they decided to enter their schools. Our training will certainly help us to be of service to others, but we must always remember the impossibility of giving out more than we have received.

I would like to see every one of us demanding that our three years' work should make us mentally quicker and brighter; that an intelligent theoretical knowledge should give deftness and ease to the work of our hands; that our powers of concentration should be developed, and that resourcefulness should become a part of our makeup. Courage and perseverance lie dormant in us all; education will develop them. Self-reliance, differing from self-assertiveness, is a trait we all stand in need of, no matter where we go. Self-control will stand us in good stead in the dark days which must almost necessarily come into every life.

Knowledge is power, and the development of the highest self-knowledge is the greatest power of all.

If we would regard every task that comes our way as a means of self-education; if we would make full use of all the advantages offered to us, and not look upon them as so much drudgery, to be got through only if they cannot be avoided, we should hear less of wasted time when circumstances prevent one of our number fulfilling the original programme of her life.

Let us demand of ourselves that our three years shall be a time of true education; we shall find our schools ready to meet our demands, and we shall have a still greater opportunity to become independent citizens. Our service to others will be the outcome of an intelligent sympathy educated to express itself in the best possible way and not the

outcome of a mere drilling; and, go where we will, do what we may, our three years will sow the seeds of self-knowledge and development, and the advancing years will give to the world a body of women constantly improving both mentally and morally, than which no city, community or country can have a better possession.

Let us see to it that we get the best possible out of our student days, in order that we may give the best possible.

A WINNIPEG GENERAL "SENIOR."

Private Duty Nursing Department

National Chairman—Miss Edith Gaskell, 397 Huron Street, Toronto.
Vice-Chairman—Miss Agnes Kelly, 457—12th St., N.W., Calgary.
Secretary-Treasurer—Miss Bertha M. Fife, 320 Roncevalles Avenue, Toronto.
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British Columbia Representative—Miss M. L. McLeay, 1532 Comox Street, Vancouver, B. C.

Hyperthyroidism as Related to Other Diseases*

By DR. FRANK N. WALKER, Toronto.

I am going to begin this paper by giving the history of my first case of Graves' disease and brief summaries of three later cases.

Case I. Male, aged twenty-five, fair hair and blue eyes, came in November, 1919, complaining of a cold and abdominal discomfort with belching of gas. His sleep was poor; constipation and frequent colds were the only other complaints. The heart rate was rapid and the first sound fibrous in character. The abdomen was in a state of flatulence with tenderness in the right iliac fossa. I referred him to Dr. G. C.

*Read before Section of Medicine, Academy of Medicine, Toronto, April 10th, 1922.

McIntyre, who removed a long narrow appendix which was bound down in a Jackson's membrane. The patient made a good recovery and returned to work in six weeks. In March, 1920, he came to see me again, complaining of nervousness. The heart rate was found to be very rapid with slight systolic murmur. The urine had a specific gravity of 1025 and showed a trace of albumen. The eyeballs were prominent and the finger tips had a fine tremor. I referred him to the late Dr. George Bingham, who agreed with me in that we were probably dealing with a case of early Graves' disease and suggested X-ray treatment and two months' rest. On April 27th, of the same year, I was called to see this patient, who had lost control of his leg muscles, so that whenever he was lifted to his feet he would crumple to the floor. He was quite conscious, and stated that he had had an X-ray treatment that day. The knee jerks could not be demonstrated. In July he began light work, although he still felt quite nervous and the exophthalmos was still noticeable. In April, 1921, this patient stopped working on account of an abscess beneath one of his toe-nails, but, in reality, his complaints showed that he was still a sufferer from Graves' disease. It was two months before work was resumed. In March, 1922, he again returned with the old complaints. X-ray films were made of some suspicious-looking teeth. These revealed one definite apical abscess. The tooth was removed and the patient continued work. Gradually improvement followed, and he now declares that his nervousness and night sweating have almost entirely left him. The exophthalmos and tremor certainly have almost disappeared.

Case II. Female, aged twenty-three, blue eyes and auburn hair. I was called to attend this case for so-called fainting spells, which usually occurred after working at high pressure. On enquiry, I found that these spells were without unconsciousness — simply a loss of power in the muscles of the legs for the most part. The heart beat was rapid and fine rales were heard over the apex of the right lung. The eyes were bulging and the fingers exhibited a fine tremor. The urine showed a trace of albumen. The uterus was retroflexed. Beyond these weak spells, the chief complaints were constipation, occipital headache and dysmenorrhœa for fourteen months. An appendectomy had been performed two years before. An X-ray examination of the teeth revealed an apical abscess. From the time this tooth was removed the patient gradually improved. The rales in the right apex cleared up, the exophthalmos and tremor disappeared. At the end of four months the uterus had returned to its normal position and the patient had gained eight pounds. In March, 1923, she reports that she is enjoying excellent health.

Case III. Female, aged thirty-seven, blue eyes, dark hair. The chief complaint was a severe left-sided headache for one week. This headache had occurred periodically for about two years. One year before she had had three months' treatment for Graves' disease. An appendectomy had been performed two years previous to the advent of the headache. The appetite was good, though constipation was complained of. The heart

rate was 120 and the temperature 99.2. There was marked tenderness over Ewing's left supra-orbital area. A fine tremor of the fingers was present, also bulging of the eyeballs. I agreed with the late Dr. Bingham's diagnosis, that this patient was suffering from Graves' disease. On shrinking the opening to the left frontal sinus, much thick, yellow pus was discharged from the left nostril and the headache immediately improved. An autogenous vaccine was prepared from the pus and administered twice weekly for six doses. Drainage was maintained during this period. The patient recovered, and has had no return of her headache or nervousness.

On analysis of these three cases it will be seen that each one had an appendectomy performed at a considerable period before Graves' syndrome was noted. This, I believe, was due to a latent condition of the appendix being aggravated by overwork of the gastro-intestinal tract in an attempt to keep pace with the needs of metabolism. Again each improved after the clearing up of a focus infection.

Case IV. Female, aged twenty-five, blue eyes, auburn hair. This patient complained of nervousness and sore throat. Exopthalmos, tremor and tachycardia with night sweats were all present. Yellow patches in the throat were negative for Klebs-Loeffler bacillus. A Wassermann reaction was four plus. Mercury and diarsenol treatment was begun, with the result that general improvement was soon noted. After eight months' treatment, Graves' syndrome had entirely disappeared.

These cases, from a clinical point of view, could all be put into one class with one outstanding syndrome. That there was very little change in the thyroid gland is to be assumed from the fact that improvement began early and was progressive.

Nellis Foster states, "It is no longer questioned that the nathogenesis of Graves' disease is intimately related in some manner with the function of the thyroid gland . . . . Two conceptions chiefly are current at present:

"(1) The symptoms are due to a pure over-activity of the thyroid gland, the secretion of which is normal but is produced or poured out in excessive amounts. . . . .

"(2) While a disordered thyroid function is accountable for some symptoms, Graves' disease cannot be explained by this alone."

Each of these theories have support in part of the hypothesis stated, but the cases cited fulfil the requirements of the second classification rather than the first.

Sajous, after a well-arranged discussion of Graves' disease, states, "Hyperthyroidism or exophthalmic goitre is thus seen to be the product of a vicious circle in which three classes of poisons take part:

"(1) The primary causative poison which excites the thyroid apparatus.

"(2) The excess of thyroid hormone which provokes excessive catabolism in all the tissues, including the cerebro-spinal peripheral nervous systems.

"(3) The excessive catabolic wastes derived from all tissues, including the nervous tissues."

Taking this statement as a basis, it will be seen that the whole complex hinges around the "primary causative poison." I have not yet learned that thyroxin has any power to destroy body poisons, or that, by increasing metabolism, the fight against the invader is waged more heavily. A heavier load on the organs of excretion is the more likely result.

It is plain to me that the thyroid gland must have some other function beyond the secretion of thyroxin. A fact that must be taken into account is that the thyroid gland is actively an epithelial organ, an outgrowth in fœtal life from the alimentary tract, the duct of which closes at the eighth fœtal week. In the amphioxus this duct remains patent. The late dissociation of the thyroid from the alimentary tract possibly explains the fact that this is the one gland of the endocrine system whose substance remains active in the presence of stomach juices, thus allowing satisfactory oral therapy. There is evidence, also, that the thyroid cells possess some of the power of the stomach cells, namely, protein disintegration.

Quoting Sajous, "Thyroidectomized dogs suffer severely when fed on meat; obviously the thyroid must contribute to the breaking down of meat proteins . . . ." Turro has found that the juice of swines' and sheep's thyroids almost entirely dissolves the coma, typhoid and anthrax bacilli, as well as bacillus coli, communic and streptococcus . . . . On the whole, as Crotti says, "The protein origin of Graves' disease is no more a puzzle. The remote causes of it are indeed numerous and diverse, as in infectious diseases, disturbed polyglandular function, chemical agents, etc., but the immediate cause is always the same, the hyper-function of the thyroid."

It seems possible that the special function of the thyroid gland is the secretion of thyroxin; also, that the gland has a second emergency function of secreting a proteolytic hormone. These powers seem so interlocked that a call upon the proteolytic hormone also stimulates the flow of thyroxin with all its physiological effects upon metabolism, and the consequent intoxication.

Before leaving this primary type of hyperthyroidism, I might call attention to the presence of Graves' syndrome in many cases of rheumatic fever, scarlet and typhoid fevers, also in tuberculosis; *but in most of these diseases this syndrome has been given its proper role, namely, that of a symptom rather than a disease.* The treatment of the real disease in most cases causes the hyperthyroidism to recede forthwith.

A point that is well worth recalling at this stage is that not all patients with foci of infection develop Graves' syndrome. *There must be some inherent complex that allows the demands of these conditions to*

precipitate hyperthyroidism. This complex is probably inherent in the relations of the various endocrine glands to one another. I have found no evidence that thyroid feeding will produce Graves' syndrome in a normal individual. This, however, is quite possible in those with disturbed endocrine function.

To quote Nellis Foster, "Blackford summarizes that every patient with thyrotoxicosis under forty, examined at post-mortem, showed evidences of hyperthrophy of the thymus."

The menopause is frequently accompanied by evidence of hyperthyroidism.

The writer had a patient showing Graves' syndrome, of which almost immediate improvement appeared after daily administration of anterior lobs of the pituitary gland. This patient is still gaining weight after seven months of the treatment, though the symptoms return when treatment is discontinued.

The cases of dysthyroidism, I believe, have an endocrine basis but, for the most part, a second or third aggravating cause is necessary to bring out Graves' syndrome.

Secondary hyperthyroidism, though not common in my experience, certainly occurs. I saw a patient in November, 1918, whose chief complaints were constipation and stomach trouble. She had a very large goitre, with sunken eyes and slow pulse. In November of 1921 I saw this patient again. She had had a great deal of worry and was five months pregnant. The chief complaints were loss of weight and nervousness. The pulse was rapid, tremor and exophthalmos were noticeable. In this case a gland that was poor in secreting power had probably taken on increased powers due to a complex of physical and mental conditions.

In conclusion, I would again quote Nellis Foster, "It is exceedingly difficult, if not impossible, to bring clinical and anatomical forms of goitre into harmony. The reason for this need not detain us since the elaborate classifications of morbid anatomists are being gradually abandoned as a clinical conception is gained of the processes leading up to the developments of each picture."

Under prognosis, Sajous states, "The search for a specific will continue to be as unsuccessful as it has been because of the multiplicity of toxis factors that initiate the disease. Each case has its own specific treatment, i.e., that of the causative disorder . . . . Briefly, very few diseases offer a prognosis as favorable as that of hyperthyroidism or Graves' disease, providing the pathogenic factor can be brought to light and removed, and the damage to the organism repaired by measures carefully adjusted to each lesion which is discovered."

Department of Nursing Education

Conducted by the Canadian Association of Nursing Education

Address to Nurses

Address by Miss M. A. Samuel, former Superintendent of Training School for Nurses, Roosevelt Hospital, New York, and Lakeside Hospital, Cleveland, Ohio, delivered at the Annual Dinner given to the Graduating Class, June, 1923, by the Montreal General Hospital Alumnae Association.

It is a very great pleasure and privilege to be with you this evening, although I must confess that the thought of making an address caused me to hesitate about accepting your most kind invitation. However, for the sake of old association with the Montreal General Hospital—the very first one I know—when in my youth, I used to visit its wards as a member of the Montreal Flower Mission, and the fact that Miss Livingston and I are graduates of the same training school, were, I felt, good reasons for not refusing; nor could I miss the opportunity of talking for a few minutes to so many of Miss Livingston's graduates, and telling them of the genuine pride the New York Hospital Alumnae has in the very wonderful record made and the success achieved by one of its members. As a charter member of the parent association, I bring to you greetings from the Alumnae of the N. Y. H. Training School for Nurses.

I also desire to express my personal appreciation of much valuable assistance from several graduates of the Montreal General Hospital during the years when I was in charge of the Roosevelt Hospital School for Nurses in New York. The positions of assistant, night superintendent and head nurse were all filled, at one time or another, by members of your Alumnae, while one of the best, if not *the* best, private duty nurses I ever knew was a graduate of the school connected with the Montreal General Hospital.

I remember reading somewhere an article, headed "The Nurse Pharisee," which dealt with some of the sins of omission of those responsible for the making of nurses, and I wondered to what extent we, who were superintendents of schools for nurses, had failed or succeeded in bringing home to our pupils a realization of their obligations and responsibilities as members of this comparatively new profession—a profession whose aims and ideals should mean, in all its many phases, service to others. I would like, if I may, to speak of a few of our mutual obligations, and present, very briefly, some of the opportunities that are given to us for their fulfilment.

First, there is our profession and all it should mean to us of high ideals, lofty aspirations, genuine enthusiasm in our work, our pride in progress, and our place as its representatives in the great army of the world's workers.

The wide extension of its fields of usefulness in private and public service makes the question of the education of the modern nurse a very vital one, and it has been stated that the profession's educational future is in our hands, and that, if we are to fulfil our manifest destiny as a profession, we must meet the conditions which the opportunities of to-day carry with them. I think it was James Russel Lowell who wrote:

"New times demand new measures and new men;
The world advances and in time outgrows
The laws that in our fathers' day were best;
And, doubtless, after us some purer scheme
Will be shaped out by wiser men than we,
Made wiser by the steady growth of truth."

And someone else says: "New things cannot come to pass without some of the old things passing away. Readjustment of new duties to new occasions is everywhere in evidence, and nowhere more than in the preparation of the nurse—alike for private and public service."

There are two great obligations that we, as nurses, workers for the betterment of humanity, must come to see more clearly before long, and they are the care of the tuberculous and the mentally ill.

Tuberculosis

The great importance of educating the student nurse more definitely in tuberculosis, both theoretically and practically, is being felt by all concerned, and nowhere is there a better or more far-reaching opportunity of making the profession an important agent in the fight than in the training schools. That there are difficulties we all know; but already several schools across the border are arranging for affiliations with special hospitals and sanitoria, just as is now being done for other communicable diseases. Of course, in public health nursing the need for special knowledge in this branch is so well known that there is no need to dwell on it now; my plea is that all graduate nurses give their support and interest in every way possible in this world-wide battle against one of the greatest foes of humanity.

Mental Nursing

Since schools for nurses have been introduced into the hospitals for the insane, we find the subject of mental nursing added to the curriculum of many general training schools, and, in a few instances, affiliations already established for practical experience, as well as systematic theoretical instruction, in well-conducted, up-to-date hospitals for the mentally ill. It is many years since this special branch was recognized as requiring special nursing attention; but the general response to the need by hospitals, training schools and nurses has, as yet, been scarcely

evident, and these patients are still being cared for, to a great exetnt, by those poorly qualified, either by character or general nursing training, to hold the responsibility incurred in psychiatric nursing.

The time must come when more thought and attention will be given to this all-important field; and meantime we, as nurses, must lose no opportunity, and awaken to the fact that our responsibility in the matter is serious. We should inform ourselves in every possible way as to conditions existing here and elsewhere, and study the progress being made in the better nursing care of these patients. While there are not, as yet, many schools having affiliations for this specialty, there are several excellent post-graduate courses given.

We see, therefore, some of our obligations to the community—our opportunities were never greater. Where can one go to-day and not find among philanthropic, scientific, sanitary or social organizations for the public welfare that has not, among its workers, a nurse, specially fitted by her training to assist and further, in the most practical manner, the great aims of those organizations in their efforts for the betterment of the world, and for the uplifting and guiding of so many dependent ones towards a more hygienic, more moral living?

The constantly increasing demands for public health nurses should make us realize how much the world has need of us, and that we cannot live unto ourselves and be worthy of our great calling. It should be our endeavor to foster in ourselves, and in others, a keen sense of our duty in this respect; through our associations, doing all in our power to awaken interest in the various questions and problems so vital to the welfare of humanity.

Our School

We must remember our obligations to our school—our Alma Mater; she who took us, immature and undeveloped as many of us were, untried in so many things pertaining to the daily battle of life, and who, after trials and tribulations, it may be, finally molded us into shape, sending us forth equipped for this battlefield of service. What does she require of us? First, our unswerving loyalty; then our devoted interest to her welfare; and, lastly, our ready co-operation in all efforts made for her progress, her place among others, with high educational ambitions, and an earnest desire to promote such efforts that may lead only in this direction.

Associations

Still another obligation is ours—more serious and of greater importance now than even a few years ago—that of supporting and developing our associations, from the Alumnae of our school to the National Association of all our provinces; from the school and individual interests of the first to the broader, more varied, far-reaching, world-wide interests of the latter; and coming between the various local societies of special workers with special aims and interests. All have need of us, in one way

or another, and to them we owe definite duties. Let us not be satisfied with the average level, but, realizing that progress is the keynote of success, each one, according to her ability, endeavor in every way to promote professional interests and help to solve professional problems. There is work for each one, and the opportunity is ever present to maintain the high standards set for us by our leaders of to-day, as well as those of other years.

It has been stated that the Alumnae Associations of the schools for nurses are the backbone of all other nursing organizations. What do we expect from them? This is what Miss Nutting says: "The guiding principle is that of mutual aid as an essential factor in human progress, and this does not come about through isolation from one's fellows, but by constant association, and thus we advance the statue and the power for good of a body of workers. Only in this way do we maintain 'the honor and dignity' of a profession." Alumnae Associations sometimes fail to realize this place they occupy, and overlook their obligations to provincial and national organizations. It is to the Alumnae we look for the training of graduates for active membership and leadership in the larger associations, whose influence in maintaining professional standards and solving nursing problems is so far-reaching. In this respect, our opportunities are, indeed, many; and I want to ask specially for the co-operation of each member of this Alumnae in the work of the Association of Registered Nurses in this province, which will require the loyal support and active interest of all its members in its efforts to establish proper professional standards.

School for Graduate Nurses

I feel sure you are, as I am, very proud of the School for Graduate Nurses as a department of McGill University; and the fact that it was organized, and is so ably directed by a member of your Alumnae Association, is a just tribute to Miss Livingston and the school of the Montreal General Hospital.

The interest shown by so many graduates of this and other schools in the province in the Institute recently planned and directed by this department of the university demonstrated the desire for post-graduate study, and it should be the ambition of every nurse to add to her professional equipment and avail herself, when possible, of such opportunities.

The Montreal General Hospital Alumnae

For your own Alumnae, may I ask the personal interest of each individual member? The association, remember, is not just the property of the president and officers, nor are they wholly responsible. You are all needed; and not as onlookers, merely, but as co-operative workers. There are some people who think that because they cannot "speak in public," or say they have not the ability to write papers, or never could conduct a meeting, they are therefore of no use. Let me tell you, these

people make a great mistake. It is not always the most eloquent, or the most literary, valuable and all as they are to all societies, who are the most useful members. The member who is interested and willing will find many occasions arise when she can be of service; her presence at meetings encourages others; and she probably will be one who remembers to pay her dues, to notify the secretary of any change in address, and very likely we may find that she is a subscriber and regular reader of the nursing magazines.

Be broad-minded; strive to compel confidence in yourselves and each other; forget personal feeling in the desire that each should possess to do her part in this great profession to which it is our privilege to belong. We all feel the need of stimulus and inspiration, which, as Miss Nutting says, we cannot get in isolation and a narrow sphere of self-interests. So much work awaits us in the outside circle, if we are only willing to broaden our outlook and swim with the current. Our obligations to each other are manifold; and we, who are graduates of one, two or many years' experience, have great responsibilities in our relationship to those just entering the professional world. Let us see to it that our example, our conversation, our manner may not prove a stumbling block in the path of these young members, but rather that we, through our experience, prove to them the value of opportunity and the pleasure and satisfaction that will come from embracing that opportunity, which is expressed so beautifully by Mrs. Browning:

"A poor man served by thee shall make thee rich;
A sick man helped by thee shall make thee strong.
Thou shalt be served thyself by every sense
Of service which thou renderest."

The Graduating Class

And now a word of welcome to the youngest members, with every good wish for their future. As we welcome you as members of our profession, may we not hope for your interest and assistance in our common work? Ours is a progressive calling, said Miss Nightingale; we must advance; and we, who are older, who have travelled farther on the high road of life, need you, with your fresh aspirations, your youthful enthusiasm, your eager ambitions—that, in unity of purpose, in hearty co-operation and loyal fellowship, we may together strive to fulfil, in some measure, our obligations to this great calling. Privileges and opportunities, some of which those who graduated twenty or thirty years ago had never dreamed, are, without effort or thought on your part, yours to-day.

Hand in hand with these come serious responsibilities and obligations which must be conscientiously borne and earnestly fulfilled. May you be inspired with a keen sense of these, and enter into the larger, broader life in the spirit of Service—which seeketh not its own.

Hospitals and Nurses

NOVA SCOTIA

New Glasgow

The unveiling of a memorial window in the First Presbyterian Church recently to the memory of Margaret M. Fraser, C.A.M.C., N.S., is the second memorial in New Glasgow to her memory. The other is the endowment of a bed for nurses in the Aberdeen Hospital, New Glasgow, which was done by the Local Council of Women. The window is the gift of private friends of Miss Fraser, and represents Christ with Mary and Martha. Miss Fraser lost her life, with other nursing sisters of the C.A.M.C., when the hospital ship, "Llandovery Castle," was torpedoed, June 27th, 1918.

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NEW BRUNSWICK

Fredericton

Miss Elizabeth Robinson Scovil was among the graduates of the Massachusetts General Hospital, when they celebrated the fiftieth anniversary of the opening of the training school connected with it. Miss Scovil graduated in 1880.

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QUEBEC

Royal Victoria Hospital, Montreal

Miss Blanche Anderson (1915) has been appointed instructor and Miss Jean Fisher (1923) night supervisor of the Malone Hospital, Malone, N. Y.

Miss Agnes Y. Sutherland (1916) is at present night supervisor of the R.V.H. and Miss Barbara Campbell (1919) of the Ross Pavilion.

Misses Kathleen Sanderson (1921) and Olive Fitzgibbon are taking courses this session at the School for Graduate Nurses, McGill University.

Miss Grace Moffatt (1921) has been appointed first assistant at the Miramichi Hospital, Newcastle, N. B.

Western Hospital, Montreal

Miss Phyllis Dean has resigned her position as night superintendent at the Western Hospital.

Miss M. P. Leavitt, R.N., has resigned her position at the Red Cross Lodge, Montreal, and is succeeded by Miss M. Scriver, R.N.

Miss Jaques has taken charge of the children's ward, Western Hospital.

Sympathy is extended to Miss J. Craig, superintendent of the hospital, and to Dr. R. Craig, on the death of their sister.

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ONTARIO

Hamilton

Miss Ada Scheifele, graduate of the Hamilton General Hospital (1923), and winner of the Maclaren prize of $50.00, has taken up missionary work, in India, under the W.M.S. of the Presbyterian Church.

Toronto General Hospital

Three missionary workers were designaeted at the Presbyterian Church in Toronto in June, two being graduates of this school—Miss Jean McKenzie, who was born in China, and Miss Coral Brodie; Dr. Victoria Chung, a Chinese woman, born in Victoria, B. C., and who after graduating from Toronto University was an interne at the Toronto General Hospital, being the third woman to receive such an appointment.

WESTERN HOSPITAL, TORONTO

Miss Beatrice L. Ellis (Toronto General Hospital) has been appointed lady superintendent of the Toronto Western Hospital, and Miss Ruth Welstead (T. W. H., 1918) in charge of the probationers in the same hospital.

BRANTFORD

Misses V. Wood and A. Bartley (Brantford General Hospital) have accepted positions in Greenwich General Hospital, Greenwich, Conn.

KINGSTON

The Alumnae Association of the Kingston General Hospital, at their October meeting, voted to give $25.00 to the Japanese Relief Fund. A pleasant afternoon was spent, with many members present.

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MANITOBA

WINNIPEG

Mrs. A. M. McLeod has been transferred by the S.C.R. to Deer Lodge, Winnipeg.

Misses Jean Boyd and Ruby Corbett (Children's Hospital, Winnipeg) have accepted positions at the Children's Memorial Hospital, Chicago.

Miss Robena Caldwell (Winnipeg General Hospital) has been appointed to the staff of the hospital, Trail, B. C.

Miss M. Sayer (W.G.H.) is now assistant night supervisor at the Winnipeg General Hospital.

Misses Ada Melbourne and Louise Dowe (Children's Hospital, Winnipeg) have gone to California to take positions in the Children's Hospital, Hollywood.

Recent appointments to the staff of the Children's Hospital are: Miss Jean Tomlinson (1922), assistant in the operating room; Miss Violet Snyder (1922), in charge of the infants' department; and Miss Annie Coppleman (1922), night superintendent for the summer months.

Miss Anna Campeau (St. Boniface Hospital, 1923) has accepted a position in the operating room of her hospital; and Miss Ernestine Lavery, also a graduate of the St. Boniface Hospital, is now in charge of the maternity ward.

BRANDON

Miss Helen Morrison (R.V.H., 1921) has resumed duty on the staff of the General Hospital after an enjoyable trip on the continent.

Miss Clara Sutherland has resigned her position of O.R. supervisor at the B.G.H., and has been succeeded by Miss B. Chapman, recently of the Henry Ford Hospital, Detroit, Mich.

Miss H. Cameron, X-ray technician at the Bigelow Clinic, Brandon, for the past four years, and treasurer of the B.G.N.A., has left for McGill University, where she will take a post-graduate course.

Miss Bernice Haekes, of Grimsby, Ont., has accepted a position as dietitian at the General Hospital.

Miss Schwietzer and Miss Stewart, both of the Winnipeg General Hospital, have been appointed to the staff of the Hospital for Mental Diseases, Brandon.

When the Manitoba Hospital Convention met in Brandon, September, 1923, the members enjoyed a banquet given by the Brandon Graduate Nurses' Association.

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SASKATCHEWAN

SASKATOON

At a meeting of the Saskatoon Graduate Nurses' Association, held on September 6th, Mrs. Johns, president of the association, was appointed general convenor to act with the Arrangements Committee in making the final arrangements for the nurses' bazaar. The proceeds of the bazaar are to go towards furnishing a ward in the new provincial sanitarium to be erected in Saskatoon.

Miss Jean Leitch (St. Paul's Hospital, 1920) left for Rochester, to take a post-graduate course.

The University Registrar reports the following successful candidates at the nurses' registration examinations conducted in July last: Edith Amas, Beatrice E. Brockman, Marion S. Brown, Dora Campbell, Mary Chisholm, Ethel Clark, Edna A. Cunningham, Lola Dunn, Maude Dunn, Hettie E. Fawcett, Margaret E. Grant, Helen E. Guild, Naina G. Gustafson, Margaret M. Green, Nora M. Hanlon, Sarah E. Hart, Marguerite E. Hood, Ruth M. Kennedy, Lenora Laxdal, Agnes C. Lewis, Faiga R. Lifshitz, Flavia Linton, Alice M. Luck, Mary E. Matthews, Elsie Miller, Berta Moeller, Olive O. Morton, Anna Overkirk, Helen McCarthy, Janet McKenzie, Charlotte J. Semple, Sarah K. Schwalm, Sister M. Ivan, Charlotte Stoneman, Aldis Sveinson, Sophia Sveinson, Margaret I. Tate, Grace M. Thompson, Dorothy M. Tipper, Marguerite E. Urton, Phyllis V. Wilbee, Florence K. Willey, Annie C. Wilson, Mary E. Woods, Cecilia L. Young, Elnor M. Jowsey.

In addition to the foregoing list, the Nurses' Council accepted the following applications for registration in the province—that of Miss Alice Lacoursiere, Mrs. W. O. Chown, Miss Emma Imogen Smith, and Miss Elizabeth Sowler.

* * * *

ALBERTA

The annual convention of the Alberta Association of Registered Nurses was held October 15th and 16th in the Public Library, Calgary, with a good attendance of nurses. The Council met at 9.30 a.m. and the general meeting was held at 10.30, when general business was transacted. Papers on "Industrial Nursing," by Miss C. M. Johnston; "Medical Inspection of Schools," by Dr. G. Oakley; and "The Relation of a Public Health Nurse to a Community," by Miss C. Lonsdale, of Drumheller, were read. The evening session opened with the address of welcome from the mayor of Calgary, and the response by the president of the A. A. R. N., Mrs. Manson. "Junior Red Cross Work" was taken up by Mrs. Fisher, and Miss Johns, of the University of British Columbia, spoke on "Some Phases of the Rockefeller Report on Nursing." On Tuesday, the "Progress of the Public Health Section" was given by Miss E. Clark; while papers on "Our Method of Preparing Material for Operations," by Sister Laverty, of Calgary, and on "Fitting Nurses for the Smaller Hospitals," by Miss F. Welsh, of Lamont, closed the programme for the morning. Two papers, on "Modern Treatment of Diabetes," by Dr. A. McCalla, of Calgary, and "Care and Feeding of Diabetic Patients at the University Hospital, Edmonton," by Miss Lawrie, of Edmonton, with round-table conferences, closed the meetings.

Calgary

The annual meeting of the C.A.G.N. was held in the Y.W.C.A. parlors on September 13th. The announcement of the election of officers for the new year was made, when a very cordial vote of thanks was tendered the retiring president, Mrs. R. P. Stuart Brown, for her untiring efforts to promote the welfare and interest of the nurses. Reports of various committees were then received. There had been ten regular meetings and eight of the Executive Council. The Membership Committee reported 130 members in good standing; nine had married. The local registry belonging to the association had done good work, filling 738 calls, and twenty-two positions were filled through it. Much praise was given Miss Cooper for the successful dances and teas held during the year, which had helped to augment the funds. Interesting lectures had also been given by local physicians, for which the thanks of the association had been given. Mrs. A. H. Calder, the new president, then appointed her executive and members of the various committees. After some routine business, the meeting adjourned.

On the 18th September a large gathering of members of the association met at the home of Mrs. R. P. Stuart Brown, and presented her with a purse of gold as a mark of their appreciation of her services as president for two years. Mrs. Brown is a member of the Council of the Royal British Association, and has held that office ever since she came to Canada. The retiring secretary, Miss L. Phillips, was presented with roses as a very slight recognition of her valuable services. Music and dancing brought the evening to a happy close.

* * * *

BRITISH COLUMBIA

Vancouver

At the September meeting of the V.G.N.A. it was decided to hold a bazaar, on November 3rd, in aid of the community work being done by the association for the Creche. Short but entertaining addresses were given by Miss Archibald,

Miss Hall and Miss Johns, their subject being "Hobbies." At the October meeting Mrs. Calhoun, in charge of the Vancouver brancnh of the V.O.N., gave a most interesting account of her work while attending the public health course at Ann Arbor, Mich. Tea was served in both instances by the Social Committee.

VICTORIA

The Victoria G.N.A. held their October meeting on the 9th at the recreation room of St. Joseph's Hospital. Miss Snider, Social Service worker, gave a most interesting address. The postponed rummage sale is to be held October 20th. After the meeting refreshments were served by the Sisters of St. Joseph's, whose kindness was much appreciated.

Miss Jessie Mackenzie, R.N., has left for California, on an extended leave, after a serious operation for appendicitis.

NELSON

The graduation exercises of the 1923 class of the Kootenay Lake General Hospital, Nelson, took place September 24th, when the following nurses received their diplomas and medals: Misses Charlotte Collins, Maizie MacKenzie and Louisa Woodburn. The prize for general proficiency was won by Miss Collins, one for best medical nursing by Miss MacKenzie, and the L. E. Borden medal for materia medica by Miss L. Woodburn. The exercises were held in the Memorial Hall, filled to capacity. A short musical programme and inspiring addresses were given. The distribution of prizes, medals and diplomas, followed by the recital of the Florence Nightingale pledge, closed the formal exercises. A reception and dance closed the evening's enjoyment.

The general meeting of the G. N. A. of B. C. was held September 29th at the Royal Columbian Hospital, New Westminster. Meetings of the three committees —Public Health Nursing, Private Duty Nursing and Nursing Education—were held in the afternoon, prior to the meeting of the Council, when several matters were referred to it by the committees. The general meeting in the evening was well attended. The result of the ballot as to the manner of casting the vote for officers was given, with a very large majority in favor of the former manner of voting, viz., at annual meeting only. Reports from committees were given, showing much progress and interest in all three nursing committees. The report of the summer course at the U.B.C. was given by Miss Johns, showing that much interest had been shown and results satisfactory. The revision of the curriculum is being carried on, the general meeting endorsing the work already done. The reports of the Private Duty Committee, with special report of the Private Duty Nurses' Institute, when thirty-three nurses attended, showed the increased interest taken since this committee was formed.

Several resolutions from the public health nurses, particularly that which requested that all organizations employing public health nurses should be notified that there are specially trained nurses available in the province and asking that they be given the preference when appointments are made.

An interesting talk was given by Dr. Telford on the proposed scheme of health extension to be discussed soon by the B. C. Medical Association. Through an unavoidable change in Dr. Riggs' plans, his lecture on "Goitre" was postponed till some future meeting.

WORKED WITH FLORENCE NIGHTINGALE

The death took place at Northampton, on September 15th, 1923, of Dr. A. G. Wilkinson, aged eighty-three. The deceased went to the Crimea, when a student, as a dresser, and worked with Florence Nightingale. He assisted with the wounded after the charge of the Light Brigade.

Love is life's end, an end, but never ending—
Love is life's wealth, ne'er spent, but ever spending.
Love life's reward, rewarded in rewarding.

BIRTHS

Barager—On September 23rd, 1923, at Brandon, to Dr. and Mrs. C. A. Barager (E. Ledoux, St. Boniface Hospital), a son.

Campbell—At Hamilton, Ont., on September 5th, 1923, to Mr. and Mrs. Norman Campbell (Sybil Garner, Kingston General Hospital, 1921), a daughter.

Carmichael—At Detroit, Mich., August 9th, 1923, to Mr. and Mrs. John Carmichael (Mary Charlotte Brouse, Kingston General Hospital, 1919), a son.

Causgrove—At Saskatoon, on July 2nd, 1923, to Mr. and Mrs. A. Causgrove (Alla Garrison, St. Paul's Hospital, Saskatoon), a daughter.

Folks—On September 8th 1923, at Clayton, N. Y., to Dr. and Mrs. J. T. Folks (Madge Glenn, Kingston General Hospital, 1919), a son.

Frayne—At Lombardy, Ont., to Mr. and Mrs. Frayne (Luella Hutchison, Kingston General Hospital, 1920), on September 12th, 1923, a son.

Gibson—At Winnipeg, on July 22nd, 1923, to Mr. and Mrs. J. Gibson (Margaret Belcher, St. Paul's Hospital, Saskatoon), a daughter.

Hoffman—On October 3rd, 1923, to Dr. and Mrs. Hoffman (Toronto Western Hospital, 1919), a son.

Houlding—At Brantford, Ont., September 6th, 1923, to Mr. and Mrs. H. Houlding (Miss Lulu Simpson, Brantford General Hospital), a daughter.

Housten—At Hamilton, Ont., October 9th, 1923, to Dr. and Mrs. J. H. Houston (Marion Davis, Kingston General Hospital, 1919), a daughter.

McGuire—At the Wellesley Hospital, August 19th, 1923, to Mr. and Mrs. McGuire (Minnie Coleberry, Wellesley Hospital, 1918), a daughter.

McLennan—At Ocre River, Winnipeg, Man., August 29th, 1923, to Dr. and Mrs. F. McLennan (Lilla G. S. Wilson, Kingston General Hospital, 1919), a daughter, Nancy Margaret.

Musgrave—At the Wellesley Hospital, Toronto, Ont., August 8th, 1923, to Mr. and Mrs. Musgrave (Victoria Marsh, Wellesley Hospital, 1918), a daughter.

MARRIAGES

Aitcheson-Harold—At Kingston, Ont., September 15th, by the Rev. J. W. Stephens, Mary Kathleen Harold (Kingston General Hospital, 1921) to Dr. Charles Wilson Aitcheson, of Yarker, Ont.

Barnes-Walcott—In Toronto, Ont., Mabel Walcott (Toronto Western Hospital, 1920), of Barbadoes, W.I., to Dr. Leslie Barnes, of Yorkton, Sask.

Burgess-Martin—At Kingston, Ont., August 7th, 1923, Pearl Martin (Kingston General Hospital, 1917) to Robert Burgess.

Campbell-Patterson—On September 8th, 1923, Jean Black Patterson (St. Eugene's Hospital, Cranbrook, B. C.) to Mr. F. T. Campbell, of Blairmore, Alta.

Clarke-Stewart—In July, 1923, Ada Stewart (Children's Hospital, Winnipeg) to Mr. William Clarke, of Minnedosa, Man.

Hebb-Cruise—On October 1st, 1923, at Dartmouth, N. S., Grace Elizabeth Cruise (Toronto General Hospital, 1917) to Arthur Morrison Hebb, B.A., M.D.

Kilpatrick-Cochrane—At Stella, Ont., September 27th, 1923, Lessie Laird Cochrane (Kingston General Hospital, 1919) to William Arthur Kilpatrick, of Stella.

Kirkness-Hodson—At Bolton, Ont., Nell Hudson (Toronto Western Hospital, 1921), to Mr. Kirkness, of Parry Sound, now living in Baltimore, Md.

Mace-Moore—At the Church of St. John the Evangelist, Montreal, September 29th, 1923, Amy Marguerite Moore (Royal Victoria Hospital, 1921) to Mr. Thomas Henry Mace.

Matson-Stewart—At Brantford, Ont., June 5th, 1923, Iyla Stewart (Brantford General Hospital) to Mr. Milton Matson, of Niagara Falls, N. Y.

McKee-Thorvalson—On September 10th, Miss C. Thorvalson (Winnipeg General Hospital, 1915) to Mr. Russell McKee.

Montgomery-Coley—At Winnipeg, Man., August 20th, Ethel Coley (St. Boniface Hospital, St. Boniface, Man.) to Dr. Wesley Montgomery.

Mundell-Tett—At Newboro, Ont., September 1st, 1923, Honor Senkler Tett (Royal Victoria Hospital, 1918) to David Kenneth Mundell, M.D.

Peters-Coon—On September 8th, by the Rev. A. E. Sanderson, Hazel Sarah Coon (Kingston General Hospital, 1920) to William Peters, of Kingston.

Piffen-Forrester—At Calgary, Alberta, August, 1923, Margery Forrester (Hospital for Sick Children, 1917) to Dr. M. C. Piffen, of Rocky Ford, Alberta.

Spiers-Lambert—At Winnipeg, August 1st, 1923, Helen Lambert (Winnipeg General Hospital) to Mr. A. Spiers, of Winnipeg.

Watson-McEown—In Saskatoon, on July 27th, 1923, Sadie E. McEown (Saskatoon City Hospital, 1917) to Mr. George Watson, of Melfort, Saskatchewan.

MAKING WORK A PLEASURE

Even in the twentieth century the House of Health has work on its doormat and can be made to have the necessary smiles within its threshold. Very well, to find the smiles, you must find a modern substitute for beginning and finishing—a substitute for what goes before and after the little push you are privileged to give to the general system. I believe that in a measure you can find such a substitute in the habit of reading-up about your industry. If, for instance, you are tied to the auto industry, take an auto journal. Follow the manufacturing process with your mind, even if your body stays behind. Follow the auto inventions. Follow the auto sports. But especially follow the good of mankind as the auto serves it. If it serves it ill, look into that too; not with a mere grudge, but with a wish to be helpful, so far as your influence counts. You are a part of the service in spite of yourself. Become conscious of your part and the spite will go out of it. The cure of self-love is the love of others. Service—that's the spiritual cork.

—Editorial in *The Health Builder*.

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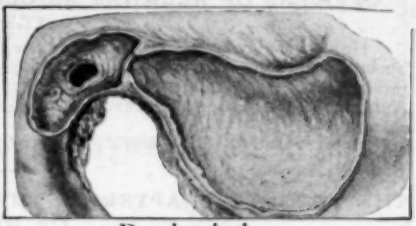
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Programme Committee—Misses Moyer, Freel, McGinnis, Rawlings, Buchanan and Honey

Regular Monthly Meeting—Last Tuesday, at 2:30 p.m.

THE ALUMNAE ASSOCIATION OF THE AMASA WOOD HOSPITAL TRAINING SCHOOL FOR NURSES, ST. THOMAS, ONTARIO

Hon. President, Miss L. Weldon; Hon. Vice-President, Miss L. Armstrong; President, Miss L. Crane; Vice-President, Miss Y. Birt; Secretary, Miss L. Parker; Treasurer, Mrs. R. W. Stevenson.

Executive Committee—Misses Vollett, Bennett, Bell, Grant and Coulthard.

Representative to "Canadian Nurse"—Miss H. Hastings.

STRATFORD GENERAL HOSPITAL ALUMNAE ASSOCIATION

Hon. President, Miss A. Mann; President, Miss A. Keeler; 1st Vice-President, Miss M. Derby; 2nd Vice-President, Miss L. Culbert; Secretary-Treasurer, Miss F. Cavell. Convenor of Social Committee, Miss M. Bullard. Representative to "Canadian Nurse", Miss F. Cavell.

THE ALUMNAE ASSOCIATION OF ST. JOSEPH'S HOSPITAL, CHATHAM, ONTARIO

Honorary President, Sister M. Regis; Honorary Director, Sister M. Theodore; President, Miss Hazel Gray, Chatham, Ont.; Vice-President, Miss Felice Richardson, Chatham, Ont.; Secretary-Treasurer, Miss Grace Norton, Chatham, Ont.

Representative to "Canadian Nurse"—Miss Anna Curry, Chatham, Ont.

Sick Committee—Miss R. Waters, Port Huron; Miss Ilhargey, Detroit, Mich.; Miss E. Mann, Chatham, Ont.

Regular Monthly Meetings—First Monday of each month at 3 p.m.

THE THUNDER BAY GRADUATE NURSES' ASSOCIATION, FORT WILLIAM AND PORT ARTHUR, ONT.

Honorary President, Mrs. J. W. Cook, Fort William, Ont.; President, Mrs. W. McClure, Fort William, Ont.; First Vice President, Miss Irene Holmes, Port Arthur, Ont.; Second Vice-President, Mrs. M. Wark, Port Arthur, Ont.; Third Vice-President, Mrs. S. Hancock, Fort William, Ont.; Treasurer, Miss T. Gerry, Fort William, Ont.; Recording Secretary, Miss Marjorie Strawson, Port Arthur, Ont.; Corresponding Secretary, Mrs. W. J. Stirrett, Port Arthur, Ont.

Convenor of Sick Visiting Committee—Mrs. O'Leary, Port Arthur, Ont.

Convenor of Social Committee—Miss Sara MacDougall, Port Arthur, Ont.

THE ALUMNAE ASSOCIATION OF THE WOODSTOCK GENERAL HOSPITAL TRAINING SCHOOL FOR NURSES

Honorary President, Miss Frances Sharpe; President, Miss Nora Montgomery; Vice-President, Miss Gladys Mill; Recording-Secretary, Miss M. H. Mackay, R.N.; Assistant Secretary, Miss Annie Hill; Corresponding Secretary, Miss Gladys Jefferson; Treasurer, Miss Evelyn Peers.

Regular Monthly Meeting—Second Monday, at 8 p.m.

THE SAULT STE. MARIE GENERAL HOSPITAL ALUMNAE ASSOCIATION.

Honorary President, Rev. Sister M. Dorothea; President, Miss M. Delaney; First Vice-President, Mrs. J. O. Driscoll; Second Vice-President, Miss S. Kehoe; Secretary-Treasurer, Miss Mae Marshall, General Hospital, Sault Ste. Marie, Ontario.

THE ALUMNAE ASSOCIATION OF ST. BONIFACE HOSPITAL, ST. BONIFACE, MANITOBA

Honorary President, Rev. Sister Gallant, St. Boniface Hospital; President, Miss Stella Gordon, 251 Stradbrook Avenue, Winnipeg; First Vice-President, Miss Kate Wymbs, King George Hospital; Second Vice-President, Mrs. George McDonald, No. 1 Vaughan Street; Secretary, Miss A. Racine, 34 Valado Street; Treasurer, Miss Theresa O'Rourke, 119 Donald Street.

Convenor of Social Committee—Miss Chafe.

Convenor of Sick Visiting Committee—Miss G. Comartin.

Representative to "Canadian Nurse"—Miss Theresa Fitzpatrick, 753 Wolseley Ave.

Representative to Registrar—Miss A. Starr, 753 Wolseley Avenue.

THE MANITOBA ASSOCIATION OF GRADUATE NURSES

President, Miss Wilson, 798 Grosvenor Ave. (F. 6502); First Vice-President, Miss Johnstone, Superintendent of Nurses, Brandon General Hospital; Second Vice-President, Miss Martin, Superintendent of Nurses, Winnipeg General Hospital (N. 7681); Third Vice-President, Sister Gallant, Superintendent of Nurses, St. Boniface Hospital (N. 1121); Recording Secretary, Miss Carruthers, Nurses' Residence, Wolesley Ave. (B. 620); Corresponding Secretary, Miss Gordon, 251 Stradbrooke (F. 6339); Treasurer, Miss Wilkins, Bureau of Child Welfare.

THE GRADUATE NURSES' ASSOCIATION OF BRANDON

Hon. President, Miss Birtles, Alexander, Man.; President, Mrs. Pearce, 1608 Lorne Ave., Brandon; Vice-President, Mrs. Barager, Mental Hospital; Secretary, Miss Finlayson, Brandon General Hospital; Treasurer, Miss Cannon.

Convener of Registry and Eligibility—Miss C. McLeod.

Sick Visitor—Miss Kid, 12th St., Brandon.

Press Representative—Mrs. W. W. Kid, Suite 14 Imperial Apts., Brandon.

THE GRADUATE NURSES' ASSOCIATION OF MOOSE JAW, SASK.

Honorary Advisory President, Mrs. Harwood, 430 Athabaska W.; Honorary President, Mrs. Humber, 662 Stadacona W.; President, Miss H. Riddell, 813 Second N.E.; 1st Vice-President, Miss Eisele, Superintendent General Hospital; 2nd Vice-President, Miss Shepherd, York Hospital; Secretary-Treasurer, Miss C. M. Kier, Y.W.C.A.; Press Representative, Mrs. Lydiard, 329 Third N.E.; Social Service Committee, Mrs. Hedley, 1155 Grafton; Convenor Finance Committee, Miss Lind, 176 Hochelaga W.; Convenor Educational Committee, Mrs. Metcalf, 37 Hochelaga W.; Convenor Social Committee, Miss Clarke, General Hospital; Convenor Registration Committee, Miss L. Wilson, 1159 Alder Avenue; Convenor of Constitution and By-laws Committee, Miss Hunter, Cottage Hospital.

SASKATCHEWAN REGISTERED NURSES' ASSOCIATION

Incorporated March, 1917

President, Miss R. M. Simpson, Department of Education, Regina; First Vice-President, Miss E. Eisele, General Hospital, Moose Jaw; Second Vice-President, Sister Mayer, St. Paul's Hospital, Saskatoon; Secretary-Treasurer, Miss Mabel F. Gray, 2331 Victoria Avenue, Regina.

Councillors—Miss M. Montgomery, Sanitarium, Fort Qu'Appelle; Mrs. Feeney, School Hygiene Staff, Yorkton.

THE EDMONTON GRADUATE NURSES' ASSOCIATION

President, Miss Brightly; First Vice-President, Miss Olive Ross; Second Vice-President, —— ————; Secretary, Mrs. Bonneau, 10224—107th Street, Edmonton; Treasurer and Registrar, Mrs. J. Lee, 9928—108th Street.

Convenor of Sick and Flower Committee—Miss E. McRae.

Convenor of Social and Programme Committee—Miss B. McGillivray.

Representative to "Canadian Nurse"—Mrs. M. A. Boyce, 9528—106th Street.

MEDICINE HAT GRADUATE NURSES' ASSOCIATION

President, Mrs. C. E. Smyth, 874 Second Street; First Vice-President, Mrs. C. Anderson, 335 First Street; Second Vice-President, Mrs. F. Gershaw, 826 Second Street; Secretary, Miss E. McNally, Medicine Hat General Hospital; Treasurer, Miss F. Smith, 938 Fourth Street.

Executive Committee—Mrs. J. Hill, 268 Eighth Street; Mrs. J. Devlin, 57 Fourth Street.

Flower Committee—Miss E. Auger, Medicine Hat General Hospital.

New Membership Committee—Miss A. Phinney, 546-A Sixth Avenue; Miss M. Middleton, Medicine Hat General Hospital.

"Canadian Nurse" Representative—Miss A. Green, 413 Fifth Street; Miss E. Auger, Medicine Hat General Hospital.

Regular Meeting—First Monday in each month.

CALGARY ASSOCIATION OF GRADUATE NURSES

President, Mrs. A. H. Calder, 510—10th St., W.; First Vice-President, Miss Dewar, 326—18th Ave., W.; Second Vice-President, Miss Willison; Recording Secretary, Miss Fraser; Corresponding Secretary, Miss Olin, 2012—2nd St., W.; Treasurer, Miss N. B. D. Hendrie, 1314—4th St., W.; Registrar, Miss M. E. Coopoer, 1412—1st St., W.

Delegates to L.C.W.—Mrs. R. P. Stuart, Miss Agnes Kelly, and Miss Dewar.

Sick Committee—Misses Ashe and Ballard.

Finance Committee—Misses Agnes Kelly and Maclear.

Books Committee—Misses Quance and McLear.

Entertainment Committee—Miss Cooper.

Committee for "Canadian Nurse" Magazine Subscriptions—Misses Cooper and Phillips.